58-1-501.5 Anatomic pathology services -- Billing violations.

(1) As used in this section, the following definitions apply:

(a)

- (i) "Anatomic pathology services" including "technical or professional component of anatomic pathology services" means:
 - (A) histopathology or surgical pathology, meaning the gross examination of, histologic processing of, or microscopic examination of human organ tissue performed by a physician or under the supervision of a physician;
 - (B) cytopathology, meaning the examination of human cells, from fluids, aspirates, washings, brushings, or smears, including the pap test examination performed by a physician or under the supervision of a physician;
 - (C) hematology, meaning the microscopic evaluation of human bone marrow aspirates and biopsies performed by a physician or under the supervision of a physician and peripheral human blood smears when the attending or treating physician or other practitioner of the healing arts or a technologist requests that a blood smear be reviewed by a pathologist;
 - (D) subcellular pathology and molecular pathology; and
 - (E) blood bank services performed by a pathologist.
- (ii) "Anatomic pathology services" including "technical or professional component of anatomic pathology services" does not include the initial collection or packaging of a sample for transport.
- (b) "Clinical laboratory" or "laboratory" means a facility for the biological, microbiological, serological, chemical, immunohematological, hematological, biophysical, cytological, pathological, or other examination of materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of any disease or impairment of human beings or the assessment of the health of human beings.
- (c) "Health care facility" has the meaning provided in Section 26-21-2.
- (d) "Health care provider" includes:
 - (i) an advanced practice registered nurse licensed under Chapter 31b, Nurse Practice Act;
 - (ii) a chiropractic physician licensed under Chapter 73, Chiropractic Physician Practice Act;
 - (iii) a dentist licensed under Chapter 69, Dentist and Dental Hygienist Practice Act;
 - (iv) a nurse midwife licensed under Chapter 44a, Nurse Midwife Practice Act;
 - (v) an optometrist licensed under Chapter 16a, Utah Optometry Practice Act;
 - (vi) an osteopathic physician and surgeon licensed under Chapter 68, Utah Osteopathic Medical Practice Act:
 - (vii) a podiatric physician licensed under Chapter 5a, Podiatric Physician Licensing Act;
 - (viii) a physician and surgeon licensed under Chapter 67, Utah Medical Practice Act; and
 - (ix) a physician assistant licensed under Chapter 70a, Physician Assistant Act.
- (e) "Insurer" includes:
 - (i) any entity offering accident and health insurance as defined in Section 31A-1-301;
 - (ii) workers' compensation benefits;
 - (iii) a health maintenance organization; or
 - (iv) any self-insurance, as defined in Section 31A-1-301, that offers health care insurance or benefits.

(2)

(a) A health care provider who orders anatomic pathology services for a patient from an independent physician or laboratory may not directly or indirectly mark up, charge a commission, or make a profit on the anatomic pathology service provided by the independent physician or laboratory.

- (b) Nothing in Subsection (2)(a):
 - (i) restricts the ability of a health care provider, who has not performed or supervised either the technical or professional component of the anatomic pathology service, to obtain payment for services related solely to the collection and packaging of a sample and administrative billing costs; or
 - (ii) restricts the ability of the lab function in the Department of Health to bill for services.
- (3) A health care provider when billing a patient directly for anatomic pathology services provided by an independent physician or laboratory shall furnish an itemized bill which conforms with the billing practices of the American Medical Association that conspicuously discloses the charge for each anatomic pathology service, physician or laboratory name, and address for each anatomic pathology service rendered to the patient by the physician or laboratory that performed the anatomic pathology service.
- (4) The disclosure to be made under Subsection (3) shall not be required when the anatomic pathology service is being ordered by a hospital, a laboratory performing either the professional or technical component of the service, or a physician performing either the professional or technical component of the service, a public health clinic, or a state or federal agency.
- (5) Failure to comply with the requirements of this section shall be considered to be unprofessional conduct.

Amended by Chapter 250, 2008 General Session